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Implementation of the Declaration of Commitment on HIV/AIDS and the Political Declaration on HIV/AIDS

Letter dated 15 August 2008 from the Chargé d'affaires a.i. of the Permanent Mission of Mexico to the United Nations addressed to the Secretary-General

I have the honour to transmit herewith the ministerial declaration entitled "Prevention through education" adopted at the first meeting of Ministers of Health and Education to stop HIV/AIDS and sexually transmitted infections in Latin America and the Caribbean, held in Mexico City on 1 August 2008 and attended by representatives of 31 Latin American and Caribbean countries (see annex).

I should be grateful if you would have this letter and its annex circulated as documents of the General Assembly at its sixty-third session, under item 44 of the provisional agenda.

(*Signed*) Socorro **Rovirosa**
Ambassador
Chargé d'affaires a.i.
Deputy Permanent Representative of Mexico to the United Nations

* A/63/150.

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Annex to the letter dated 15 August 2008 from the Chargé d'affaires a.i. of the Permanent Mission of Mexico to the United Nations addressed to the Secretary-General

[Original: English/Spanish]

First Meeting of Ministers of Health and Education to Stop HIV and STIs in Latin America and the Caribbean

Prevention through education

1. Preamble

Gathered in Mexico City for the XVII International AIDS Conference, with the objective of strengthening the response to the HIV epidemic in formal and informal education, we, the Ministers of Health and Education of the countries of Latin America and the Caribbean:

1.1 Affirm our commitment to the right to enjoy the best possible health; and the right to education, non-discrimination and well-being of current and future generations;

1.2 Reiterate our conviction that education and health can act in synergy to prevent the spread of HIV and other sexually transmitted infections (STIs); and that education and health are mutually reinforcing, enabling comprehensive human development;

1.3 Recognize the responsibility of the State to promote human development, including education and health, as well as to implement effective strategies to educate upcoming generations and protect them from infection, and to combat all forms of discrimination;

1.4 Formally signal our commitment to guarantee full adherence to the right to health and other related rights established in international human rights documents and standards, in particular access to quality education for all children, adolescents and youth in our countries in an environment free from violence, stigma and discrimination. This requires increasing and strengthening efforts to ensure that students directly affected by HIV have access to, and remain in, school;

1.5 Reiterate our governments' existing commitments regarding human rights, HIV and AIDS, sexual and reproductive health and the well-being of children, adolescents and youth (see enclosure);

1.6 Recognize the decisive role of families in the well-being and development of our present and future generations, as well as the need to ensure that HIV and STI prevention efforts include all relevant actors in society;

1.7 Acknowledge the consensus documents developed and published within the United Nations system which largely reflect the available scientific evidence in this field.

2. Whereas:

2.1 HIV is an epidemic that demands a multi-sectoral, coordinated response that is both immediate and sustained;

2.2 In Latin America and the Caribbean, HIV is primarily transmitted via unprotected sex. For this reason, diverse expressions of sexuality and the various contexts that heighten vulnerability to HIV should be taken into account;

2.3 Sexuality is an essential part of being human and is expressed throughout life. Childhood and adolescence are significant stages in the personal development of peoples and their countries, and there is therefore a need for quality education that includes sex education both as a human right and as a contribution to present and future quality of life;

2.4 Unequal relationships between the sexes and among age groups, socio-economic and cultural differences, and diversity in sexual orientation and identities, combined with risk factors, create situations of increased vulnerability to HIV/STI infection;

2.5 A considerable percentage of young people engage in their first sexual encounter at an early age, often without any protection against sexually transmitted infections;

2.6 Comprehensive sex education starting in early childhood favours the gradual acquisition of information and knowledge necessary to develop the skills and attitudes needed for a full and healthy life as well as to reduce sexual and reproductive health risks;

2.7 Scientific evidence demonstrates that comprehensive sex education, including HIV/STI prevention methods — such as the correct and consistent use of male and female condoms, access to HIV/STI diagnostic tests and full STI treatment, and having fewer sexual partners — does not lead to earlier or more frequent relations;

2.8 Among those who are not yet sexually active, scientific evidence shows that comprehensive sex education including information on different prevention methods and encouraging responsible behaviour promotes independence and thus young people's capacity to decide when to initiate sexual activity;

2.9 A response to the epidemic that is effective over the long term will only be possible if prevention strategies are successful. The only way to fulfil the global commitment to providing universal access to anti-retroviral treatment for people with HIV is to strengthen prevention efforts to reduce the spread of the epidemic and the future demand for treatment.

3. In the light of the foregoing, we, the Ministers of Health and Education, agree to:

3.1 Implement and/or strengthen multi-sectoral strategies for comprehensive sex education and promotion of sexual health, including HIV/STI prevention, in a manner which complements the efforts we undertake in connection with our own responsibilities and functions. To ensure that these efforts are affordable and sustainable, we will strengthen cooperation between the two sectors by establishing formal mechanisms for planning, monitoring, evaluation and follow-up of joint efforts, as well as by establishing links with other sectors;

3.2 Comprehensive sex education will have a broad perspective based on human rights and respect for the values of a democratic, pluralistic society where families and communities thrive. It will include ethical, biological, emotional, social, cultural, and gender aspects as well as topics related to the diversity of sexual orientations and identities, in accordance with the legal framework of each country, to promote respect for differences, reject any form of discrimination, and foster responsible and informed decision-making among young people regarding their first sexual relations;

3.3 Evaluate our current educational programmes during 2009 and 2010 to identify to what extent comprehensive sex education is incorporated and implemented in the curriculum at all levels of education and in all teaching systems under the jurisdiction of the Ministries of Education;

3.4 Update, before the end of 2010, the content and teaching methods of the curricula falling within the jurisdiction of the Ministries of Education to include comprehensive sex education, in collaboration with the Ministries of Health. This exercise will be guided by the best scientific evidence available, endorsed by the relevant international organizations, in consultation with experts, and take account of civil society and communities, including children, adolescents, youth, teachers, and families;

3.5 Review, update and reinforce the training of educational personnel, from the teacher-training stage to training for existing teachers. By 2015, all initial training and refresher training under the jurisdiction of the Ministries of Education, for both formal and informal education will include the new comprehensive sex education curricula;

3.6 Ensure that the design of health promotion programmes extensively involves the community and families, including adolescents and youth, in order to recognize their needs and aspirations regarding sexual and reproductive health, as well as HIV/STI prevention, and to encourage their involvement in developing and implementing appropriate responses;

3.7 Ensure that health services are youth friendly, are delivered with full respect for human dignity and, within each country's legislation, that they take into account the specific sexual and reproductive health needs and demands of adolescents and young people, considering the diversity of sexual orientation and identity, and establishing suitable referral procedures within the health sector;

3.8 Ensure that health services provide for everyone, especially adolescents and young people, effective access to counselling and testing for HIV and STIs, full treatment for STIs, condoms and instruction in their correct and consistent use, guidance regarding reproductive decisions, including guidance for people with HIV, and treatment for drug and alcohol abuse;

3.9 Promote outreach efforts with the mass media and civil society in order to improve the quality of the information and messages disseminated and to make them more consistent with the curriculum for comprehensive sex education and promotion of sexual health;

3.10 Work with the executive and legislative branches of government, in those countries where it is appropriate, to guarantee a suitable legal framework and the

necessary budget for the implementation of comprehensive sex education and promotion of sexual health;

3.11 Ensure the existence of a formal mechanism for reporting discrimination in public and private education and health services, and work proactively to identify and correct such discrimination, through efforts within government institutions and society, including national institutions for the defence of human rights, civil society organizations and other similar entities;

3.12 Identify and/or mobilize resources in each of our countries for a detailed impact assessment of five or more strategies for comprehensive sex education, sexual health promotion and HIV/STI prevention in adolescents and young people, by 2015;

3.13 Recommend the inclusion of these undertakings for discussion and promotion at the XVIII Ibero-American Summit of Heads of State and Government in San Salvador, El Salvador in October 2008; the V Summit of the Americas in Port of Spain, Trinidad and Tobago, in April 2009; the fifth Central American Congress on HIV (CONCASIDA) in San José, Costa Rica in October 2009; and the Latin American and Caribbean Forum on HIV/AIDS and STDs in Lima, Peru, in May 2009;

3.14 Recognize the need for technical and financial support from multilateral agencies and international funding sources to achieve the commitments in this Declaration;

3.15 In order to fulfil these undertakings, we hereby establish an Inter-sectoral Working Group to follow up the commitments in this Declaration and request that UNAIDS and its co-sponsors participate in that Working Group.

4. To accomplish these undertakings, we will seek to achieve the following targets:

4.1 Reduce by 75 per cent the number of schools under the jurisdiction of the Ministries of Education that have failed to institutionalize comprehensive sex education;

4.2 By 2015, reduce by 50 per cent the number of adolescents and young people who are not covered by health services that address their sexual and reproductive health needs appropriately.

With the conviction that these actions reflect our countries' commitment to the children, adolescents and young people of Latin America and the Caribbean, with fraternal countries and with the international community, reflecting our contribution to the global effort to confront the HIV pandemic, we have adopted this declaration and assumed its undertakings. Done on 1 August 2008, in Mexico City.

Enclosure

States' commitments on human rights, sexual and reproductive health and HIV/AIDS

- The United Nations Universal Declaration of Human Rights (1948);[1]
- The WHO Constitution;[2]
- The United Nations Millennium Declaration, of 8 September 2000;[3]
- The Declaration of Commitment on HIV/AIDS (UNGASS 2001);[4]
- The World Summit for Social Development: Copenhagen Declaration on Social Development (1995);[5]
- The political declaration and further action and initiatives to implement the Beijing Declaration and Platform for Action, of 10 June 2000;[6]
- Key actions for the further implementation of the Programme of Action of the International Conference on the Population and Development, of 2 July 1999;[7]
- The Declaration of the Tenth Ibero-American Summit of Heads of State and Government, of 18 November 2000;[8]
- The Pan-Caribbean Partnership against HIV/AIDS, of 14 February 2001;[9]
- The Declaration of Ministers of Education, Buenos Aires, 30 March 2007;[10]
- The San José Pact;[11]
- The Andean Charter for the Promotion and Protection of Human Rights;[12]
- The United Nations Convention on the Rights of the Child;[13]
- The United Nations Convention on the Elimination of All Forms of Discrimination against Women;[14]
- International Covenant on Civil and Political Rights, 16 December 1966;[15]

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1 http://www.unhchr.ch/udhr/lang/eng.htm.
2 http://www.who.int/governance/eb/constitution/en/index.html.
3 http://www.un.org/millennium/declaration/ares552e.htm.
4 http://data.unaids.org/publications/irc-pub03/aidsdeclaration_en.pdf.
5 http://www.un.org/esa/socdev/wssd/agreements/decparta.htm.
6 http://www.unescap.org/esid/GAD/Events/BeijingPlatform1999/recommendation.pdf.
7 http://www.un.org/popin/unpopcom/32ndsess/gass/215a1e.pdf.
8 http://www.sre.gob.mx/dgomra/cibero/Documentos/xcumbre.htm.
9 http://www.pancap.org/doc.php?id=1.
10 http://www.unesco.cl/medios/biblioteca/documentos/declaracion_de_buenos_aires_prelac_2_ingles.pdf.
11 http://www.oas.org/juridico/English/treaties/b-32.html.
12 http://www.uasb.edu.ec/padh/revista19/documentos/Cartaandinaparalapromocionyprotecciondelosderechoshumanos.pdf.
13 http://untreaty.un.org/English/TreatyEvent2001/pdf/03e.pdf.
14 http://www.un.org/womenwatch/daw/cedaw/text/econvention.htm.
15 http://www.unhchr.ch/html/menu3/b/treaty5_asp.htm.

- International Covenant on Economic, Social and Cultural Rights, 16 December 1966;[16]
- NGO Declaration on Education for All, Dakar, Senegal 25 April 2000;[17]
- World Education Forum, Dakar Framework for Action, Dakar, Senegal, 26-28 April 2000;[18]

Expert consensus documents

- Sexually transmitted Infections among adolescents: The need for adequate health services (WHO);[19]
- Global consultation on the health services' response to the prevention and care of HIV/AIDS among young people: Achieving the global goals: access to services (WHO);[20]
- Preventing HIV/AIDS in young people: A systematic review of the evidence from developing countries (UNAIDS Inter-agency Task Team on Young People);[21]
- Impact of HIV and sexual health education on sexual behaviour of young people: a review update (UNAIDS).[22]

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[16] http://www.unhchr.ch/html/menu3/b/treaty4_asp.htm.

[17] http://portal.unesco.org/education/en/files/47105/11806987065WEF2000_NGO_EN.pdf/WEF2000_NGO_EN.pdf.

[18] http://unesdoc.unesco.org/images/0012/001211/121147e.pdf.

[19] http://www.who.int/reproductive-health/publications/stis_among_adolescents/index.html.

[20] http://www.who.int/child_adolescent_health/documents/9241591323/en/index.html.

[21] http://www.who.int/child_adolescent_health/documents/trs_938/en/index.html.

[22] http://data.unaids.org/Publications/IRC-pub01/JC010-Imp.